PTO/S8/01 (10-00)

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			Attorn y Docket Numb	ber PU3552USW	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		First Nam d Inventor	HARRIS, et al.		
		COMPLE	COMPLETE IF KNOWN		
	(37 CFR 1.63)		Application Number	/	
			Filing Date		
	Submitted after	Group Art Unit			
		Filing (surcharge	Examiner Name		

As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original names are listed below) of	, first and sole inventor (if only of the subject matter which is o	one name is listed below) claimed and for which a pate	or an original, fir ent is sought on	st and joint invento the invention entitle	r (if plural ed:				
SUBSTITUTED AZ	A-OXINDOLE DERIVAT	IVES							
the specification of whi	. (11)	lle of the Invention)							
OR was filed on (MM/DD/YYYY) 03/03/2000 as United States Application Number or PCT International									
Application Number	PCT/US00/ 05583 and v	was amended on (MM/DD/Y			(if applicable).				
I hereby state that I have re amended by any amendment	eviewed and understand the cent specifically referred to abo	ontents of the above identif		, including the clair					
I acknowledge the duty continuation-in-part applica national or PCT internation	to disclose information whi ations, material information w al filing date of the continuation	ch is material to patenta hich became available beto n-in-part application.	ween the filing d	ate of the prior app	plication and the				
listed below and have also	ority benefits under 35 U.S.C PCT international application identified below, by checking ring a filing date before that of	the box any foreign annion	ne country other	than the United St					
Prior Foreign		Foreign Filing Date	Priority	Certified Cop YES	y Attached? NO				
Great Britain 9904995.9 March 4, 1999 ⊠ □ ⊠ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □									
Additional foreign applic	ation numbers are listed on a	supplemental priority data:	sheet PTO/SB/0	2B attached hereto	<u> </u>				
	nder 35 U.S.C. 119(e) of any				·				
Application Number	(s) Filing Date	(MM/DD/YYYY)			==;				
			numb supple	onal provisional ers are listed on emental priority o SB/02B attached	a data sheet				
	1	The state of the s							

[Page 1 of 3]
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DECLARATION — Utility or Design Patent Application

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	Customer Nu or Bar Code I			17 11		OR (Correspondence address below
Name				347			
Address			PATENT TRA	DEMARK (OFFICE	-	
Address					,		_
City				State			ZIP
Country		Telephon	ie		, <u>i.</u>		Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petit	ion ha	as been file	ed for this unsigned inventor
Given Name (first and middle [if any]) Philip Anthon	ıy	,		Family Name or Surname HARRIS			
Inventor's Signature		-				<u> </u>	Date
Residence: City Durham			State NC	C Country US			Citizenship GB
Mailing Address GlaxoSmithKJine							
Malling Address Five Moore Drive, P	O Box 1339	8					
City Research Triangle Park	State NC			ZIP 27	709		Country US
NAME OF SECOND INVENTOR:				A petit	ion ha	is been file	ed for this unsigned inventor
Given Name (first and middle [if any]) Lee Frederick				Family Name or Surname KUYPER			
Invent r's Signature Signature	l Ky	<u> </u>					Date 7/23/01
Resid nce: City Durham			State NC		Cour	ntry US	Citizenship US
Mailing Address GlaxoSmithKline				-:			
Mailing Address Five Moore Drive, P	O Box 1339)8	-				
City Research Triangle Park	State NC			ZIP 277	09		Country US
Additional inventors are being named	on <u>1 </u> :	supplemer	ntal Addition	nal Inven	tor(s) s	heet(s) PTO	/SB/02A attached hereto.

PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplem ntal Sheet Page 3 of 3

			-							
Name of Addition	al Joint Inventor, if ar	ny:		A petition has been filed for this unsigned inventor						
Given Na	me (first and middle [if an	y])		Family Name or Surname						
Karen Elizabeth		_		LAG	CKEY					
Inventor's Signature						Date				
Residence: City	Durham State NC Country US						Citizenship US			
Mailing Address	GlaxoSmithKline									
Mailing Address	Five Moore Drive, PO Box 13398									
City	Research Triangle Park	. 8	State NC		ZIP 27709	Coun	try US			
Name of Addition	al Joint Inventor, if ar	ıy:			A petition has been	filed for	this unsigned inventor			
Given Name (first and middle [if any])					Family Name or Surname					
James Marvin				1	VEAL					
Inventor's Signature	1	\checkmark	~				Date & -06-200 (
Residence: City	Durham	s	tate NC		Country US		Citizenship US			
Mailing Address	GlaxoSmithKline			· .						
Mailing Address	Five Moore Drive, PO	Box 1	13398				·			
City	Research Triangle Park	_ ;	State NC	,	ZIP 27709	Cou	intry US			
Name of Addition	al Joint Inventor, if an	ıy:			A petition has been	filed for t	his unsigned inventor			
Given Na	me (first and middle [if any	/])		Family Name or Surname						
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Residence: City		s	tate		Country	•	Citizenship			
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Mailing Address										
City		Sta	ite		ZIP		Country			

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DEGLADAT	CI ADATION FOR A STATE OF THE S		Attorney Docket Numb	per PU3552USW			
DECLARA	ECLARATION FOR UTILITY OR DESIGN		First Named Inventor	HARRIS, et al.			
PATENT APPLICATION			COMPLETE IF KNOWN				
		FR 1.63)	Application Number	/			
Declaration			Filing Date				
Submitted OR with Initial	R Submitted after	Group Art Unit					
Filing		Filing (surcharge (37 CFR 1.16(e))	Examiner Name				

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	ntor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the existent fort and the second sec										
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
SUBSTITUTED AZA-OXINDOLE DERIVATIVES										
the specification of which (Title of the Invention)										
is attached hereto	,,,,	tie of the invention)	•			-				
OR OR		· 								
was filed on (MM/D	D/YYY) 03/03	3/2000 a	s Unite	ed States Applic	cation Number or	PCT International				
Application Number Po	CT/US00/ 05583 and v									
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hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, international application having a filing date before that of the application on which priority is claimed.										
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DECLARATION — Utility or Design Patent Application

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Name PATENT TRADEMARK OFFICE								
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Address								
City State ZIP								
Country		Telephone)				Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVI				A petit	ion ha	s been fil	led for this unsigned inventor	
Given Name (first and middle [if any]) Philip Anthon				Family or Surn		HARRIS		
Inventor's Signature Many	2					1	Date 7/23/2001	
Residence: City Durham			State NC	Country US		ry US	Citizenship GB	
Mailing Address GlaxoSmithKline						*.		
Mailing Address Five Moore Drive, P	O Box 133	98						
City Research Triangle Park	State NC		`	ZIP 27709 Country US			Country US	
NAME OF SECOND INVENTOR	•			A peti	tion ha	as been fi	iled for this unsigned inventor	
Given Name (first and middle [if any]) Lee Frederic	k			Family or Suri		KUYPER		
Inventor's Signature							Date	
Residence: City Durham			State NO	:	Cou	ntry US	Citizenship US	
Mailing Address GlaxoSmithKline								
Mailing Address Five Moore Drive,	PO Box 13	1398						
City Research Triangle Park	State No	<u>c</u>		ZIP 27	7709	-	Country US	
Additional inventors are being named	1_ no t	_ suppleme	ental Addition	onal Inve	entor(s)	sheet(s) P	TO/SB/02A attached hereto.	

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Addition	nal Joint Inventor, if ar	ıy:		A petition has been filed for this unsigned inventor				
Given Na	ame (first and middle [if any	y])		Family Name or Surname				
Karen Elizabeth								
Inventor's Signature	Karen Eli	thate	ackey		7/23/2001			
Residence: City	/ Durham		NC	Country US	Citizenship US			
Mailing Address	GlaxoSmithKline							
Mailing Address	Five Moore Drive, PO B	Box 13398						
City	Research Triangle Park	State	NC	ZIP 27709	Coun	try US		
Name of Addition	nal Joint Inventor, if an	ıy:		A petition has be	en filed for	this unsigned inventor		
Given Na	me (first and middle [if any	(1)	•	Fan	nily Name or	Surname		
James Marvin			,	VEAL				
Inventor's Signature						Date		
Residence: City	Durham	State 1	NC	Country US		Citizenship US		
Mailing Address	GlaxoSmithKline							
Mailing Address	Five Moore Drive, PO E	3ox 13398						
City	Research Triangle Park	State	NC	ZIP 27709	Соц	intry US		
Name of Addition	al Joint Inventor, if an	y:		A petition has be	en filed for t	his unsigned inventor		
Given Nar	me (first and middle [if any])		Family Name or Surname				
			-					
Inventor's Signature						Date		
Residence: City		State		Country		Citizenship		
Mailing Address								
Mailing Address								
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